BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
SEE DETERMINATION	// /		10 1
FEE DETERMINATION		 	1-21
O.I.P.E. CLASSIFIER		50/8-	7-28-60
FORMALITY REVIEW	HL_	526	8/24/50
RESPONSE FORMALITY REVIEW	2A	50583	12/20/00
	INDEX OF C	CLAIMS	
J	Rejected	N	Non-elected

..... Allowed (Through numeral)... Canceled Date Date Claim Date Original Final 107 73

If more than 150 claims or 10 actions

staple additional sheet here